SCC eFile 2011 ANNUAL REPORT 211517420 **COMMONWEALTH OF VIRGINIA** (6/10)STATE CORPORATION COMMISSION DUE DATE: 9/30/2011 1.) CORPORATION NAME: **American Compensation Insurance Company** SCC ID NO: F1837360 2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: B.E. **AUTH IN VI** 5.) STOCK INFORMATION **CT CORPORATION SYSTEM** CLASS **AUTHORIZED** 4701 COX RD STE 301 **GLEN ALLEN, VA 23060-6802** COMMON 5,000,000 3.) CITY OR COUNTY OF VA REGISTERED OFFICE: **HENRICO COUNTY** 4.) STATE OR COUNTRY OF INCORPORATION: MN 6.) PRINCIPAL OFFICE ADDRESS: ADDRESS: 8500 NORMANDALE LAKE BLVD. **SUITE 1400** CITY/ST/ZIP: BLOOMINGTON, MN 55437-All directors and principal officers must be listed. An individual 7.) DIRECTORS AND PRINCIPAL OFFICERS: may be designated as both a director and an officer. X OFFICER DIRECTOR NAME: CLYDE H. FITCH TITLE: VICE PRESIDENT ADDRESS: 518 EAST BROAD STREET CITY/ST/ZIP/CO: COLUMBUS, OH 43215-X OFFICER DIRECTOR NAME: CYNTHIA A. POWELL TITLE: TREASURER ADDRESS: 518 EAST BROAD STREET CITY/ST/ZIP/CO: COLUMBUS, OH 43215-X OFFICER DIRECTOR NAME: JAMES A. YANO TITLE: SECRETARY ADDRESS: 518 EAST BROAD STREET CITY/ST/ZIP/CO: COLUMBUS, OH 43215-X OFFICER X DIRECTOR NAME: ROBERT P. RESTREPO TITLE: **PRESIDENT** ADDRESS: 518 EAST BROAD STREET CITY/ST/ZIP/CO: COLUMBUS, OH 43215-

JERRY BRUMFIELD

700 W. 47TH STREET

KANSAS CITY, MO 64112-

ASST SECRETARY

NAME:

TITLE:

ADDRESS:

CITY/ST/ZIP/CO:

OFFICER

DIRECTOR

			x	OFFICER		DIRECTOR	
	NAME:	JESSICA BUSS				_	
	TITLE:	VICE PRESIDENT					
	ADDRESS:	700 W. 47TH STREET					
	CITY/ST/ZIP/CO:	KANSAS CITY, MO 64112-					
		14 410/10 011 1, 1110 01112		OFFICER		DIRECTOR	
	NAME:	DENING D. DI ANII		OFFICER	Х	DIRECTOR	
	TITLE:	DENNIS R. BLANK					
	ADDRESS:	DIRECTOR					
	CITY/ST/ZIP/CO:	518 EAST BROAD STREET					
	0111/01/211/00.	COLUMBUS, OH 43215-	_			7	
				OFFICER	Х	DIRECTOR	
	NAME:	ALISON COOLBRITH					
	TITLE:	DIRECTOR					
	ADDRESS:	518 EAST BROAD STREET					
	CITY/ST/ZIP/CO:	COLUMBUS, OH 43215-					
				OFFICER	Х	DIRECTOR	
	NAME:	MICHAEL J. FIORILE					
	TITLE:	DIRECTOR					
	ADDRESS:	518 EAST BROAD STREET					
	CITY/ST/ZIP/CO:	COLUMBUS, OH 43215-					
				OFFICER	х	DIRECTOR	
	NAME:	JAMES E. KUNK					
	TITLE:	DIRECTOR					
	ADDRESS:	518 EAST BROAD STREET					
	CITY/ST/ZIP/CO:	COLUMBUS, OH 43215-					
		0020MB00, 011 10210		OFFICER	Х	DIRECTOR	
	NAME:	DALII I OTTE		OTTIOLIK	_ ^	_ BIREGIOR	
	TITLE:	PAUL J. OTTE					
	ADDRESS:	DIRECTOR 518 EAST BROAD STREET					
	CITY/ST/ZIP/CO:	COLUMBUS, OH 43215-					
		COLUMBOS, OTT 43213-		OFFIOED		DUDENTOD	
	NIANAT.			OFFICER	X	DIRECTOR	
	NAME:	KENAN L. SCHULTHEIS					
	TITLE:	DIRECTOR					
	ADDRESS: CITY/ST/ZIP/CO:	518 EAST BROAD STREET					
	CITY/ST/ZIP/CO.	COLUMBUS, OH 43215-		_		_	
				OFFICER	Х	DIRECTOR	
	NAME:	EDWIN J. SIMCOX					
	TITLE:	DIRECTOR					
	ADDRESS:	518 EAST BROAD STREET					
	CITY/ST/ZIP/CO:	COLUMBUS, OH 43215-					
				OFFICER	Х	DIRECTOR	
	NAME:	DWIGHT E. SMITH		<u> </u>		<u> </u>	
	TITLE:	DIRECTOR					
	ADDRESS:	518 EAST BROAD STREET					
	CITY/ST/ZIP/CO:	COLUMBUS, OH 43215-					
		,	Г	OFFICER	Х	DIRECTOR	
	NAME:	ROGER P. SUGARMAN			_ ^	_	
	TITLE:	DIRECTOR					
	ADDRESS:	518 EAST BROAD STREET					
	CITY/ST/ZIP/CO:	COLUMBUS, OH 43215-					
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I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.							

/s/ JERRY BRUMFIELD SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	JERRY BRUMFIELD, ASST SECRETARY PRINTED NAME AND CORPORATE TITLE	8/3/2011 DATE					
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.							